

2005-02-14

16:56

514-395-8554

Brouillette 1

P 1/2

BROUILLETTE & PARTNERS

TELECOPIER TRANSMISSION

RECEIVED
CENTRAL FAX CENTER

FEB 14 2005

Date: February 7th, 2005
Number of pages including this one: - 2 -

TO: Name:
Firm: **USpto**
Fax: 1 703 872-9306

FROM: Name: Robert Brouillette
Direct line: (514) 397-6900
E-mail: rb@brouillette.ca
Ref. No.: 11000-001
Your ref.:

Operator:
Telephone: (514) 395-8500
Extension:

COMMENTS:

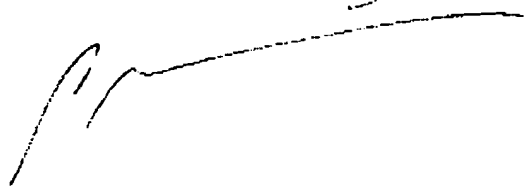
Re: US patent application no. 10/777,227
Title: Method and apparatus for providing data over a dynamic wireless network
Inventor: Jean Geoffrion

Dear Madam/Sir:

Please find enclosed herewith form PTO/SB/81, a Power of Attorney and Correspondence Address Indication Form. Kindly immediately proceed with the change of agent and address as soon as possible. We will await a confirmation letter stating that the changes have been effected.

Kindly acknowledge safe receipt of the present.

Thank you.



CONFIDENTIALITY

The information contained in this facsimile is privileged and confidential and for the use of the person or entity specified above only. The reader of this message who is not the intended recipient is hereby notified that it is strictly prohibited to disclose, distribute or copy this information. If it was transmitted to you by mistake, please immediately notify us by telephone and return the original document to us by mail. We will refund your expenses. Thank you.

1100 René-Lévesque Blvd. West, Suite 2300, Montréal, Québec CANADA H3B 4N4
Telephone: (514) 395-8500 Fax: (514) 395-8554

2005-02-14

16:56

514-395-8554

Brouillette 1

P 2/2

PTO/SB/81 (11-04)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/777,227
Filing Date	February 13, 2004
First Named Inventor	GEOFFRION, Jean
Title	Method and apparatus for
Art Unit	not yet available
Examiner Name	not yet available
Attorney Docket Number	11000-001

**RECEIVED
CENTRAL FAX CENTER
FEB 14 2005**

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:
OR

☒ Practitioner(s) named below:

Name	Registration Number
Robert Brouillette	31,930

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:
OR

☐ The address associated with Customer Number:
OR

☒ Firm or individual Name
BROUILLETTE & PARTNERS

Address
1100, René-Lévesques Blvd. West
Suite 2300

City
Montreal

State
Quebec

Zip
H3B 4N4

Country
Canada

Telephone
(514) 395-8500

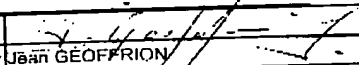
Fax
(514) 395-8554

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	February 10, 2005
Name	Jean GEOFFRION	Telephone	(514) 341-0111
Title and Company	President of CANORAWAVE CORPORATION/CORPORATION CANORAWAVE		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.